

MICHIGAN AUTISM COUNCIL & STATE PLAN
Subcommittee Application Form

The Michigan Autism Council is developing subcommittees to assist with implementing the Michigan Autism Spectrum Disorders State Plan. These subcommittees are advisory and the members are volunteers that commit time and expertise to assist with the priorities of the State Plan. Please understand that selection for service on these subcommittees is at all times in the discretion of the chairperson. For example, there may be more people interested in serving than the number of seats available on each subcommittee. Each subcommittee will report to the Michigan Autism Council and may operate uniquely to accommodate meeting locations and times, as well as, deliverables. Family members and partners from all types of organizations are welcome to work on these important autism initiatives in Michigan. If you have any questions regarding this commitment, please feel free to contact Lisa Grost, Autism Program Administrator at the Michigan Department of Community Health, at grostl@michigan.gov or 517/241-0678.

Name: _____ Phone Number: _____

Organization, if applicable: _____ Title: _____

Address/City/State/Zipcode: _____

Email Address: _____ Do you have a family member with autism? ☐ Yes ☐ No

Briefly describe your experience and knowledge in relation to autism spectrum disorders and committee work: _____

Briefly share why you are interested in working on an Autism Council – State Plan Subcommittee:

Check subcommittee (s) that you would like to serve in 2013:

***These two committees will be activated first.**

☐ **Adult Services***

☐ Evidenced-Based Practice

☐ Competencies and Professional Development

☐ Family Issues

☐ **Early Identification and Intervention***

☐ Health Care

☐ Educational Supports and Services

☐ Service and System Coordination

Are you interested in serving in a leadership role for a subcommittee? ☐ Yes ☐ No ☐ Unsure

The submission of this form acknowledges you have administrative support to represent your organization.

Please submit this form to: Kaitlyn Longoria at longoriak@michigan.gov. Kaitlyn can be reached at 517/335-1698.